



PTO/SB/05 (4/98)

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Approved for use through 09/30/2000. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

E0871 First Inventor or Application Identifier Colin D. Nayler Title Device and Method for Adjusting Inpub.

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Express Mail Label No. EJ887882688US

| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | | | | | Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231 | | | | | | | |
|--|---|--|--|---|--|--|------------------------|-------------------------------|--------------------------|-------------|--|--|--|
| * Fee Transmittal Form (e.g., PTO/SB/17) | | | | | | 5. Microfiche Computer Program (Appendix) | | | | | | | |
| י.] _ | = (| <i>Submit an on</i> Specification | iginal and a duplicate for fee | | | | | | Sequence Submission | jc 5 | | | |
| 2. [| | | angement set forth below) | I Pages [18] | (/ | f applicab | | | No Conv | ' ' | | | |
| | | • | title of the Invention | | | a | Compt | ıter Readat | ле Сору | l | | | |
| | | | erences to Related Appli Regarding Fed sponsor | | | b | Paper | Copy (ident | tical to computer copy |) | | | |
| | | | to Microfiche Appendix | 001102 | | с. | Staten | nent verifyin | g identity of above co | pies | | | |
| | - Background of the Invention - Brief Summary of the Invention | | | | ACCOMPANYING APPLICATION PARTS | | | | | | | | |
| | | | | | 7. X Assignment Papers (cover sheet & document(s)) | | | | | | | | |
| | | - Brief Description of the Drawings (if filed) | | | | 37 C.F.R.§3.73(b) Statement Power of | | | | | | | |
| | | Detailed De Claim(s) | escription | | 8. _ | = ` | | an assigne | • | | | | |
| | | • • | the Disclosure | | 9. | | | | ment (if applicable) | | | | |
| з. [| | | | Sheets 9] | 10. | | | sclosure S)/PTO-144 | Copies of I Citations | DS | | | |
| 4. | Oath o | r Declaratio | n [<i>Tota</i> | l Pages] | 11. | Prelin | ninary Ar | mendment | | | | | |
| | а. | X New | ly executed (original or | сору) | 12. | * I | | ot Postcard ecifically ite | (MPEP 503) | | | | |
| | ь. і | Cop | y from a prior application | n (37 C.F.R. § 1.63 | | | all Entity | • | ement filed in prior ap | nlication | | | |
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| | | i | Signed statement a | ttached deleting | 14 [| Certif | ied Copy | of Priority | Document(s) | | | | |
| | | | inventor(s) named in t see 37 C.F.R. §§ 1.63 | | | 一 ` | • | rity is claim | • | | | | |
| <u> </u> | VOTE FO | RITEMS 1 & 1 | | | | Othe | | | Mail | | | | |
| FOOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28). | | | | | | | | | | | | | |
| 16. | If a C | ONTINUIN | G APPLICATION, check | appropriate box, and | supply the | | | | | t: | | | |
| | | Continuation | | Continuation-in-part | (CIP) | of prior a | | | J | ' | | | |
| For | CONTI | application inf NUATION or | DIVISIONAL APPS only: 1 | The entire disclosure | of the pri | or applicat | ion, from | Art Unit: which an oa | th or declaration is sup | plied | | | |
| und | er Roy | 4b is consid | dered a part of the disclost ration can only be relied | sure of the accompa | nvina cont | inuation or | [,] division: | al application | n and is hereby incorpo | rated by | | | |
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| Name Address | | | D. Saralino | 77 | | | | - | | | | | |
| | | | Renner, Otto, Boisselle & Sklar | | | | | | | | | | |
| | | 1 | Floor | | | | | | | | | | |
| | | | 1621 Euclid Avenue State | | | Ohio | | | //115 | | | | |
| City Country | | US | Cleveland | | Ohio Zi 216-621-1113 | | Zip Code Fax | 44115 216-621-6165 | | | | | |
| COL | _ | | | Telephone | | | | | T T | $\neg \neg$ | | | |
| | Name (Print/Type) Mark D. Saralino Registration No. (Attorney/Agent) 34,243 | | | | | | | | _ | | | | |
| | Signat | ture | 11/2 | K/ | 0 | | | Date | 3/23/00 | J | | | |

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Atty Docket No. E0871



DEVICE AND METHOD FOR ADJUSTING INPUT GAIN FOR MULTIPLE SIGNAL FORMATS IN A DATA NETWORK

by

Colin D. Nayler

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that the attached patent application (along with any other paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on this date <u>March 23, 2000</u>, in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number <u>EJ887882688US</u> addressed to the: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

<u>Lisa L. DeForrest</u> (Typed or Printed Name of Person Mailing Paper)

(Signature of Person Mailing Paper)

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Date

Complete if Known

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| FEE TRANSMITTAL | | Complete if Known | | | | | | | | |
|---|-----------------------------|--------------------|------------|---------------|-------------------|---|----------|--|--|--|
| I LL HAMOMII IAL | - [| Application Number | | | | | | | | |
| for FY 2000 | | Filing Date | | | herewith | | | | | |
| Patent fees are subject to annual revision. | | First Named Inve | | entor | Colin D. Nayler | | | | | |
| Small Entity payments must be supported by a small entity statem otherwise large entity fees must be paid. See Forms PTO/SB/09- | nent, -12. | Examiner Name | | | | | | | | |
| See 37 C.F.R. §§ 1.27 and 1.28. | Group / Art Unit | | | t Unit | | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 802.00 | Attorney Docket No. | | | ocket | No. | E0871 | | | | |
| METHOD OF DAVMENT (about and) | FEE CALCULATION (continued) | | | | | | | | | |
| METHOD OF PAYMENT (check one) The Commissioner is hereby authorized to charge | 3. ADDITIONAL FEES | | | | | | | | | |
| 1. Indicated fees and credit any overpayments to: | Large | Entity | Sma | II Entity | | | | | | |
| Deposit | Code | Fee (\$) | | Fee e (\$) | | Fee Description | Fee Paid | | | |
| Account Number 18-0988 | 105 | 130 | 205 | 65 | | arge - late filing fee or oath | | | | |
| Deposit | 127 | 50 | 227 | 25 | Surcha cover s | arge - late provisional filing fee or sheet. | | | | |
| Account Renner, Otto, Boisselle | 139 | 130 | 139 | 130 | Non-E | nglish specification | | | | |
| Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17 | 147 2 | 2,520 | 147 | 2,520 | | ng a request for reexamination | | | | |
| Unider 37 OF Kigg 1.10 and 1.17 | 112 | 920* | 112 | 920* | | esting publication of SIR prior to ner action | | | | |
| 2. Payment Enclosed: Check | 113 1 | 1,840* | 113 | 1,840* | Reque Exami | esting publication of SIR after ner action | | | | |
| FEE CALCULATION | 115 | 110 | 215 | 55 | | sion for reply within first month | | | | |
| | 116 | 380 | 216 | 190 | | sion for reply within second month | | | | |
| 1. BASIC FILING FEE Large Entity Small Entity | 117 | - | 217 | | | sion for reply within third month | | | | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid | 118 1 | • | 218 | | | sion for reply within fourth month | | | | |
| 101 690 201 345 Utility filing fee 690. | | 1,850 | | | | sion for reply within fifth month of Appeal | | | | |
| 106 310 206 155 Design filing fee | 119 120 | | 219 220 | | | a brief in support of an appeal | | | | |
| 107 480 207 240 Plant filing fee | 121 | | 221 | | Reque | est for oral hearing | | | | |
| 108 690 208 345 Reissue filing fee | 138 1 | | 138 | | Petitio | n to institute a public use proceeding | | | | |
| 114 150 214 75 Provisional filing fee | 140 | 110 | 240 | 55 | Petitio | n to revive - unavoidable | | | | |
| SUBTOTAL (1) (\$) 690. | 141 1 | 1,210 | 241 | 605 | Petitio | n to revive - unintentional | | | | |
| 2. EXTRA CLAIM FEES | 142 | 1,210 | 242 | | • | issue fee (or reissue) | | | | |
| Fee from Ext <u>ra Claims below Fee Paid</u> | 143 | 430 | 243 | | | n issue fee | | | | |
| Total Claims 24 -20** = 4 × 18 = 72 | 144 | 580 | 244 | | | issue fee ins to the Commissioner | | | | |
| Independent 3 - 3** = 0 × 78 = 0 | 122 123 | 130 50 | 122 123 | 50 | | | ļ | | | |
| Multiple Dependent 260 = 0 | 126 | 240 | | 240 | | ons related to provisional applications | | | | |
| Large Entity Small Entity | 581 | 40 | 581 | 40 | | ission of Information Disclosure Stmt | | | | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) | JU 1 | 70 | 501 | ,,, | | ding each patent assignment per rty (times number of properties) | 40. | | | |
| 103 18 203 9 Claims in excess of 20 | 146 | 690 | 246 | 345 | | a submission after final rejection FR § 1.129(a)) | | | | |
| 102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid | 149 | 690 | 249 | 345 | | ach additional invention to be | | | | |
| 104 260 204 130 Multiple dependent claim, if not paid 109 78 209 39 ** Reissue independent claims | | | | | exami | ned (37 CFR § 1.129(b)) | | | | |
| over original patent | Other f | ee (sp | ecify) | | | | <u> </u> | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | Other fee (specify) | | | | | | | | | |
| SUBTOTAL (2) (\$) 72. | Reduc | ced by | Basic | Filing I | Fee Pai | subtotal (3) (\$) 4 | 0. | | | |
| SUBMITTED BY Complete (if applicable) | | | | | | | | | | |
| Name (Printl Type) Mark D. Saralipo Registration No. (Attyrne) IAGE 34,243 Telephone 216-621-1113 | | | | | | | | | | |

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